Verification Application Activity Tracker

For School Use - Keep on file

Attach to each application selected for verification with a copy of all correspondence from household regarding verification and a copy of documents received from the household. This form is an optional tool to assist with your verification procedures.

Name of Household	Number of Students
Preliminary Reviewer Signature (A person other than the determining official must check the application pulled originally determined correctly before the verification process can proceed.)	Date Pre-Review Completed for verification to ensure that it was
Date Verification Notice Letter Sent Date	te Response Due
Following up with Non-Responding Households (Required for Non-Responde	ers or N/A):
Method used to follow up with non-responding households	Date
Original Approval was:	
Free Categorical Eligible based on SNAP, TANF or FDPIR case number Care (Do not include or verify Directly Certified SNAP Report participants)	• •
Free Eligible Based on Income/Household Size Information	
Reduced-Price Eligible	
Verification Results (Document the calculations and frequency of incom	ne or agency contact on this page):
☐ No Change	
Free Categorical Eligible Based on SNAP/TANF/FDPIR/Foster Care proof SNAP Report	
Free Eligible Based on Income/Household Size Information	
Reduced-Price Eligible Based on Income/Household Size Information	
Paid Eligible Based on Income/Household Size	
Paid Eligible Based on SNAP/TANF/FDPIR Agency Response	
Paid Eligible due to Household Not Responding (document method o	f follow up above)
Date Notice of Verification Results Letter Sent	
Determining Official Signature	Date Verification Completed (Summary of Verification due by Nov 15)